CONSCIENTIOUS OBJECTION POLICY

The Genetic Counseling Program recognizes that for reasons of commonly-held ethical and religious beliefs, some students may wish not to involve themselves with certain medical procedures or services. Out of respect for such beliefs, the Genetic Counseling Program will respect conscientious objection by students if all of the following criteria are met:

1. A conscientious objection does not relieve a genetic counseling student from a duty to meet the current standard of timely and acceptable medical care, to engage in full and nonselective disclosure for Informed Consent, to inform patients of their conditions, and referral prognoses, and risks of receiving care services for their illness, condition or health-related request.
2. Patients cannot be abandoned. Any student who wishes to excuse him or herself must find another qualified individual to provide service to patients.
3. A genetic counseling student cannot object to provide a service if the patient’s condition, in the judgment of an attending physician, requires immediate action and that student’s assistance is required to provide that service.
4. A genetic counseling student shall not object to participate in the care of a specified classification or group of people, or on the basis of particular diseases or states of health or illness.
5. A genetic counseling student shall not object to provide or participate in a health care service if this objection amounts to discrimination.
6. A conscientious objection must not be so broad as to limit a student’s general medical education. If a conscientious objection constrains a student’s ability to provide the current standard of medical care, the Genetic Counseling Program may require that student to withdraw from graduate school.
7. An objection to participate in any service or delivery of care does not exempt the student from the responsibility to learn about its indications, contraindications, benefits, and risks. A student will not be exempted to demonstrate this knowledge on any examination.
8. All curricular or clinical time missed through an excused exemption must be made up otherwise.
9. When a conscientious objection might compromise completion of the curriculum, this matter will be discussed by the appropriate evaluation committees, and if necessary, by the appropriate Executive Leadership Committee. Students can represent themselves at these meetings in accordance with College of Medicine policies.
10. If, in the course of a conscientious objection, a student engages in behavior which the Genetic Counseling Program considers unacceptable for a genetic counselor, the Genetic Counseling Program may require that student to withdraw from graduate school on the basis of improper professionalism.
11. A student wishing to make a Conscientious Objection Declaration should complete the Conscientious Objection request and declaration form (available in the Genetic Counseling Program Office at 2001 Polaris Parkway). Any appeals to the decision of the Genetic Counseling Program Executive Leadership Team will be submitted to the College of Medicine Vice Dean for Education.
Conscientious Objection Request and Declaration

Student Name: _____________________________________________________________

Activity/Service Objected: _____________________________________________

Date of Activity/Service: _____________________________________________

Student’s Declaration of Objection:

In assertion and practice of this Conscientious Objection:

• I will meet the current standard of medical care, including full and nonselective informed consent and referral.
• I will not abandon any patient, especially in a life threatening situation.
• I will not refuse to assist during a public health emergency.
• I will not discriminate against any selected group(s) of people/patients.
• I will not contravene any code that governs my behavior as a genetic counseling student.
• I remain responsible for cognitive knowledge about the indications, contraindications, benefits and risks of the activity/service to which I object.
• Any curricular time missed due to this objection will be otherwise made up.

Signature: _____________________________________________________________

Date: ____________________________

Co-Director(s)’ Remarks:

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<th>YES</th>
<th>NO</th>
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<tr>
<td>This Conscientious Objection meets all policy criteria:</td>
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<td>This Conscientious Objection is to be honored during graduate education at The Ohio State University</td>
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Co-Director(s) Signature:___________________________________________

Date:_____________________________________________________________